COMPANY NAME (IF APPLICABLE) NAME ADDRESS CITY, STATE ZIP CODE + 4 COMMERCIAL TELEPHONE

FOIA Manager 178th Fighter Wing 801 Fontaine Lane Springfield-Beckley ANG Base, OH 45502-8789

Dear FOIA Manager:

Under the Freedom of Information Act (FOIA), I request (Identify the document or information as specifically as possible).

I am willing to pay all required fees incurred in providing this information.

(Optional: I am willing to pay required fees for this information up to maximum of \$_____. If fees exceed this amount, please obtain payment approval prior to incurring the dept or providing the information.)

Sincerely (PRINTED NAME AND SIGNATURE)